

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

<input checked="" type="checkbox"/> In re application of:	Leonard Pinchuk et al.	: Art Unit: 3731
Serial No.:	09/657,041	: Examiner: Michael H. Thaler
Filed:	September 5, 2000	:
FOR:	Expandable Supportive Branched Endoluminal Grafts	:
<input type="checkbox"/> Patent No.:		: Issued:

81 Reg for
Refund
12-18-03

REQUEST FOR REFUND

(Improper charge of Deposit Account)

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attention: Refund Section, Accounting Division, Office of Finance

S I R:

I. REFUND REQUEST

This is a request for refund with respect to the charge to Deposit Account No. 18-0350 shown on the statement dated October 31, 2003 for the above-identified

☒ application.

☐ patent.

☒ A copy of the monthly statement in which the error referred to occurs, accompanies this request.

Processed
12/18/03
★

II. FEES CHARGED FOR WHICH REFUND IS REQUESTED**AMOUNT OF
REFUND
REQUESTED**☐ Filing fee☐ Surcharge for filing the basic filing fee on
a date later than the filing date of the
application (37 CFR 1.16(e))

and/or

☐ Surcharge for filing the oath or
declaration on a date later than
the filing date of the
application (37 CFR 1.16(e))☒ Extension of term

_ month

☐ Excess claims☐ Issue fee☐ Petition fee☐ Patent maintenance fee

maintenance fee

☐ Patent maintenance fee surcharge☒ Other Statutory Disclaimer 110.00

TOTAL REFUND REQUESTED 110.00

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

The Examiner requested in the Office Action dated July 2, 2003 (on the first line of the Office Action) that "a copy of the terminal disclaimer filed in the parent application which matured into patent No. 5,855,598 is required". Therefore we did not file an original terminal disclaimer, we merely submitted a copy of the terminal disclaimer previously submitted in the parent application.

IV. MANNER OF REFUND

Please make refund by

☒ crediting Account No. 18-0350.

☐ refunding payment.

Respectfully submitted,


Jonathan H. Spadt, Reg. No. 45,122
Attorney for Applicant

Dated: October 22, 2003

Suite 301
One Westlakes, Berwyn
P.O. Box 980
Valley Forge, PA 19482-0980
(610) 407-0700

BSI-430US8

- 4 -

The Assistant Commissioner for Patents is hereby authorized to charge payment to Deposit Account No. 18-0350 of any fees associated with this communication.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope with sufficient postage addressed to:
Assistant Commissioner for Patents, Washington, D.C.
20231 on:

October 28, 2003

Denise Morgan

**Deposit Account Statement**

Requested Statement Month: October 2003
Deposit Account Number: 180350
Name: RATNER AND PRESTIA
Attention:
Address: P O BOX 980
City: VALLEY FORGE
State: PA
Zip: 19482

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
10/01	26	1784586	AMT-7551US	8521	\$40.00	\$17,121.07
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10/15 27 PAYMENT	9203	-\$5,000.00	\$16,254.07
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10/16 151	8014	\$25.00	\$15,594.07
10/16 208 PCT/US03/31485	KPG-5058WO 1704	\$689.00	\$14,905.07
10/20 133 78315217	POR-108 7001	\$335.00	\$14,570.07
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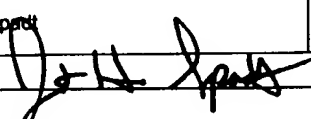
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BALANCE	CHARGES	REPLENISH	BALANCE
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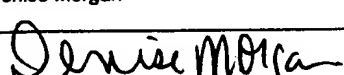
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/657,041
	Filing Date	9/5/2000
	First Named Inventor	Leonard Pinchuk
	Art Unit	3731
	Examiner Name	Michael H. Thaler
Total Number of Pages in This Submission 7		Attorney Docket No. BSI-430US8

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Dclaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of USPTO Deposit Account
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual	Jonathan H. Spatt	Registration No. (Attorney/Agent)	45,122
Signature			
Date	10/22/03		

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			
			10/22/03
Name (Print/Type)	Denise Morgan		
Signature		Date	10/22/03

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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